

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000019847

FILED
Mar 23, 2009
Secretary of State

Entity Name: WIALAN TECHNOLOGIES CORPORATION

Current Principal Place of Business:

10273 NW 46 STREET
SUNRISE, FL 33351

New Principal Place of Business:

Current Mailing Address:

10273 NW 46 STREET
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 59-3778886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMMIRATA, SERGIO
788 NW 127TH AVE.
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DV () Delete
Name: AMMIRATA, SERGIO M
Address: 788 NW 127TH AVE.
City-St-Zip: CORAL SPRINGS, FL 33071

Title: DP () Delete
Name: TAPIA, VICTOR
Address: 6780 SW 185 WAY
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: D () Delete
Name: HERNANDEZ, MANUEL
Address: 788 NW 127TH AVE.
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Delete
Name: PINO, LEOPOLDO
Address: 502 WALLIS FARM LANE
City-St-Zip: MARIETTA, GA 30064

Title: D () Delete
Name: ORTIZ, FABIO/KATIUSKA
Address: 4840 SW 196 LANE
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: D () Delete
Name: FANA, ARMANDO
Address: 282 SW 179 AVE
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VICTOR TAPIA

DP

03/23/2009

Electronic Signature of Signing Officer or Director

Date